Case 16-27591 Doc 1 Filed 08/29/16 Entered 08/29/16 09:26:56 Desc Main Document Page 1 of 71 Fill in this information to identify your case: FILED United States Bankruptcy Court for the: UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS Northern District of Illinois AUG 29 2016 Case number (If known): Chapter you are filing under: Chapter 7 Chapter 11 JEFFREY P. ALLSTEADT, CLERK Chapter 12 Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Cederic Write the name that is on your government-issued picture First name identification (for example, your driver's license or Middle name passport). Middle name KODGERS Bring your picture Last name Last name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8; First name years Middle name Include your married or maiden names. First name First name Middle name Middle name Last name Last name xxx - xx - 1 1 8 3 3. Only the last 4 digits of your Social Security number or federal OR

(ITIN)

Individual Taxpayer

Identification number

9 xx - xx -

9 xx - xx -_____

Page 2 of 71 Document Debtor 1 About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN 5. Where you live If Debtor 2 lives at a different address: Street Number Street City State ZIP Code County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Street Number Street P.O. Box P.O. Box City ZIP Code City State State ZIP Code 6. Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. ☐ I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Case number (if known)	
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Part 2

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you	Check of the Check	ne. (For ruptcy (I	a brief description of Form 2010)). Also, go	each, see <i>Noti</i> to the top of p	ice Required by 1 st age 1 and check t	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.	
	are choosing to file under	X Cha						
		🔲 Cha	pter 11					
		☐ Cha	pter 12					
		🗖 Cha	pter 13					
8.	How you will pay the fee	you you sub	will pay the entire fee when I file my petition. Please check with the clerk's office in your ocal court for more details about how you may pay. Typically, if you are paying the fee rourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
		App	ication	for Individuals to P	ay The Filing	Fee in Installme	otion, sign and attach the ents (Official Form 103A).	
		By la less pay	iw, a jud than 15 the fee	dge may, but is not i0% of the official p	t required to, voverty line that you choose th	waive your fee, a at applies to you iis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	No Yes.	District		When	MM / DD / YYYY	Case number	
			District		When		Case number	
			Dintsiat		148	MM / DD / YYYY		
			District		When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy	∑ No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		http://www.news.com/gray.com/gray.com/gray.com/gray.com/gray.com/gray.com/gray.com/gray.com/gray.com/gray.com/g	and the state of t		
	cases pending or being filed by a spouse who is	Yes.	Debtor				Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?		District		When	MM / DD / YYYY	Case number, if known	
			Debtor				Relationship to you	
			District		When	MM / DD / YYYY	Case number, if known	
11.	Do you rent your residence?	□ No. Yes.	Go to lir Has you	ır landlord obtained a	ın eviction judgı	ment against you	and do you want to stay in your	
				Go to line 12.				
			Yes		nent About an E	Eviction Judgment	Against You (Form 101A) and file it with	

Filed 08/29/16 Entered 08/29/16 09:26:56 Desc Main Page 4 of 71 Debtor 1 Case number of known Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or Number Street LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if **Bankruptcy Code and** any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any

Part 4:

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

		Number	dioct		
		Number	Street	 	
	Where is the property?				** ************************************
	If immediate attention is	s needed, w			
5.	What is the hazard?	**************************************			

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Case number (if known)

Part 5:

Debtor 1

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing abou
credit counseling because of:

I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances

rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

 □ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

promise the second seco

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

De	ebtor 1 (e deri	Rodgens	9	umber (if known)		
	First Name Middle Nan	ie Last Name		(I NOWI)		
P	art 6: Answer These Que	stions for Reporting Purposes	s			
16	. What kind of debts do you have?	16a. Are your debts primarily as "incurred by an individual	y consumer debts? Cons primarily for a personal, famil	umer debts are defined in 11 U.S.C. § 101(8) y, or household purpose."		
		☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
		16b. Are your debts primarily money for a business or inve	y business debts? Busine estment or through the operati	ess debts are debts that you incurred to obtain on of the business or investment.		
		No. Go to line 16c. Yes. Go to line 17.				
		16c. State the type of debts you or	we that are not consumer del	ots or business debts.		
17.	Are you filing under Chapter 7?	☐ No. I am not filling under Chap	oter 7. Go to line 18.		33-4050	
	Do you estimate that after any exempt property is excluded and administrative expenses	**				
chevene	are paid that funds will be available for distribution to unsecured creditors?	Yes	NAY aka 4 Amelika ili kunnenaker pinyana di nikilkadamakida kabun akaban kaban saka saka saka saka saka saka s			
18.	How many creditors do you estimate that you	1-49 X 50-99	1,000-5,000 5,001-10,000	25,001-50,000 50,001-100,000	Althor	
	owe?	100-199 200-999	10,001-25,000	☐ More than 100,000		
19.	How much do you estimate your assets to	\$0-\$50,000 \$50,001-\$100,000-	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 millio		especti	
	be worth?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 milli	on \$10,000,000,001-\$50 billion		
20.	How much do you estimate your liabilities a	\$0-\$50,000	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million		plantians.	
	to be?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 mil	on \$10,000,000,001-\$50 billion		
j.	17974 Sign Below			The field that the billion		
Fo	r you	I have examined this petition, and I correct.	declare under penalty of per	jury that the information provided is true and		
		If I have chosen to file under Chapt of title 11, United States Code. I un under Chapter 7.	ter 7, I am aware that I may p nderstand the relief available i	roceed, if eligible, under Chapter 7, 11,12, or 13 under each chapter, and I choose to proceed		
		If no attorney represents me and i of this document, I have obtained and	did not pay or agree to pay so I read the notice required by 1	omeone who is not an attorney to help me fill out 11 U.S.C. § 342(b).		
				States Code, specified in this petition. bbtaining money or property by fraud in connection		
		with a bankruptcy case can result in 18 U.S. 2 \$\s\\$ 152, 1341, 1519 and	n fines up to \$250,000, or imp	prisonment for up to 20 years, or both.		
		× Juliu lidge	X			
		Signature of Debtor 1 Executed on 0 8 24		Signature of Debtor 2		
01.007AI	etter filmstratistische Stelle Somethale Somethale Stelle	Executed on V V V V V V V V V V V V V V V V V V		Executed on MM / DD / YYYY	and the	

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Debtor 1	Case 16-2759	Doc 1 Filed 08/29/ Document Last Name		6:56 Desc Main
represente If you are by an atto	ttorney, if you are ed by one not represented rney, you do not e this page.	to proceed under Chapter 7, 11, 12 available under each chapter for whe the notice required by 11 U.S.C. § 3	ned in this petition, declare that I have info , or 13 of title 11, United States Code, and nich the person is eligible. I also certify the 342(b) and, in a case in which § 707(b)(4) information in the schedules filed with the	d have explained the relief lat I have delivered to the debtor(s) (D) applies, certify that I have no
		Printed name Firm name Number Street		
		City Contact phone	State Email address	ZIP Code
		Bar number	State	

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Debtor 1	First Name Middle Name	Last Name	Case num	ber (if known)		
	you are filing this y without an	The law allows you, as an individual should understand that many themselves successfully. Becausequences, you are strong	people find it extrem ause bankruptcy has	ely difficult to represent long-term financial and legal		
an attorne	represented by ey, you do not e this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.				
		court. Even if you plan to pay a par in your schedules. If you do not list property or properly claim it as exe also deny you a discharge of all yo case, such as destroying or hiding	rticular debt outside of y t a debt, the debt may n empt, you may not be ab eur debts if you do some property, falsifying reco ermine if debtors have b	ole to keep the property. The judge can ething dishonest in your bankruptcy ords, or lying. Individual bankruptcy been accurate, truthful, and complete.		
		successful, you must be familiar wi	t treat you differently be ith the United States Ba al rules of the court in w	you to follow the rules as if you had ecause you are filing for yourself. To be nkruptcy Code, the Federal Rules of which your case is filed. You must also		
		Are you aware that filing for bankru consequences?	ptcy is a serious action	with long-term financial and legal		
		X No	d be fined or imprisoned	- · ·		
		Yes. Name of Person Attach Bankruptcy Petition P	Preparer's Notice, Declara	ation, and Signature (Official Form 119).		
	×	have read and understood this notic attorney may cause me to lose my	ce, and I am aware that	involved in filing without an attorney. I filing a bankruptcy case without an not properly handle the case.		
		Signature of Debtor 1 Date MM / DD / YYYY		ignature of Debtor 2		
		Contact phone 773-203-(Cell phone	NU 81	MM / DD / YYYY contact phone		
		Email address (eneric RO)	2 MAN COME	rell phone		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re: Cederie Rodgers)	
Debtor (s))	Case No.
)	Chapter 7

List of Creditors

LAW office: EDWARD A. SZYMANSK; P.O. BOX: 5358 ELGIN, IL 60121-571 Phone: 847-841-6400/841-1313	Paul D. LAWENT/TURNER Acceptance-Z P.O. Box 5718 ELGIN, IL 60121-5718
TURNER Acceptance: 4410 N. RAVENSWOOD AVE Chicago, IL 60640	TURNER Acceptance; 5700 HOWARD ST. SKOKIE, IL 60077
1 4.0, 60x; 70886	Freeman Anselmo Lindberge LL.C 1771 W. DIEHL ROAD Suite:150 P.O. BOX 3228 NAPERVILLE, IL 60563 630-428-4610
BLITT & GAINES, P.C. 661 GIEEN AVE. Wheeling, IL 60090	Nelson, Watson & Associates 80 Merrimack ST, Lower Level Haverhill, MA 01830
Capital BANK P.O. BOX 30281 SAIH LAKE CHY, UT 84130	United Recovery Systems 5800 N. Course Drive Houston, Tx 77072

SUNBAGETIC COMMUNICATIONS, Inc 5450 N.W Central #1000 Houston, Tx 77092-2016	Synergetic Communications, Inc 2700 E. SELtice WAY, Ste:4 Post FAlls, ID 83854-6387
ORpital UNE Auto P.O.BOX 259 407 Plano, TX 75025	SIR FINANCE Corporation. 6140 N. LINCOLN AVE Chicago, IL 60659
DSC Delbert Service Corp. RE: Western SKy Financial 7125 POllock DR. LAS VEGAS, NV 89119	CASH CALL P.O. BOX 66007 ANAheim, CA 92816
RE: SILVER Cloud National CREDIT SYSTEMS, INC P.O. BOX 312125 Atlanta, GA 31131-2125	Malcolm S. Ferald & Associates 332 S. Michigan AVE Suite:600 Chicago, IL 60604
PROCESSING CENTER -27 P.O. BOX 55126 BOSTON, MA 02205-5126	TWO WELLS AVENUE Newton, MA 02459
ENHANCED RELOVERY CO. P.O. BOX 1259 CREditors Sterling Tewekes Dept 98696 OAKS, PA 19456	Alcicolo, oli
Credit control, UC. 5757 Phantom DR. ste:330 Hazelwood, Mo 63042	PENN CREdit / P.O. BOX 1259 916 S. 14th ST / DEPT, 91047 P.O. BOX 988 / PAKS, PA 19456 HArrisburg, PA 17/08-0988
StollAR Recovery, INC 1327 Highway 2 NV, Ste:100 KALispell, MT 59901.3413	WOW Chicago C/O CREDIT MgT. P.O. BOX 118288 CASTOLLTON. TX 75011-8288
Maccantile Adjustment Bureau, UC 165 Lawrence Bell DRIVE Ste:100 Williamsville, NY 14221-7900	CliENT SERVICES. 3451 HARRY S. TRUMAN BLVD. ST. CHARLES, MO 63301-4047
North Star Location SERVICES LLC. Attn: Financial SERVICES DEPT.	First Source Advantage P.O. Box 628 BUFFALO, NY 14240-0628

First Source Advantage 205 Bryant woods South AMHERST, NY 14228	FIRST SOURCE ADVANTAGE LCC. P.O. BOX 628 BUFFAIO, NY 14240-0628
FIA CARD Service P.O. BOX 628 BUFFALO, NY 14240-0628	First National Collection Bureau 610 WAITHAM WAY Spanks, NV 89434
PREMEIR BANK CARD BUTERV OF COLLECTION FECOVERY 7575 CORPORATE WAY EDEN PRAIRE, MN 55344	Linebarger Goggan Blair + Sampson P.O. 130x 06140 Chicago, IL 60606-0140
TOU WAY CLO ARONOLD SCOH HARRIS III W. JACKSON BLVD #1400 CHICAGO, FL 60604	United Recovery Services, LLC. 18525 Torrance AVE. Ste: Cb LNSing, IL 60438
ADVOCATE HEALTH Center 21014 Network Place Chicago, IL 60673-1210	MALLULM S. GERALD 3 ASSOCIATES 332 S. Michigan AVE. Suite: 600 Chicago, IL 60604
MC3 Collections INC. 725 S. WELLS ST. Stef 50/ Chicago, IL 60607	Ingalls Memorial Hospital P.O. Box 5995 /DEPT:0028 PEORIA, IL 61601-5995
Medical Recovery Specialists 2250 E. DEVON AVE. STE: 352 DEPLAINS, IL 60018-4519	Ingalls Memorial Hospital Payment Process center P.O. Box 5435 Pept:0028 Canol STREAM, FL 60197-5435
CREDIT Collection SERVICES Two WENS AVENUE, Dept 587 Newton, MA 02459	QUEST DIAGNOSTICS P.O. BOX 64804 BALtimore, MD 2/264-4804
ARM_ P.O.BOX 129 THOROFARE, NJ 08086-0129	ST. James DiaBetes 38005 Eagle Way CHicago, IL 60678-6001
NCO FINANCIAL SYSTEM 605 W. EDISON RD Steik Mishawaka, IN 46545	ILLNOIS COLLECTION SERV P.O. BOX 1010 TIN ELY PARIL, IL 60477-9118

BUREAU OF Collection Recovery	BUREOU OF Collection Recovery
7575 Corporate WAY	P.O. BOX 9001
EDEN PRAIRIE, MN 55344	Minneton KA, MN 55345
ARNOLD Scott Harris P.C 222 Merchandise Mant Plaza Ste:1932 Chicago, IL 60654	AMericash Loan 179 W. Van Buren ChicaGo, IL 60605
INTERNAL REVENUE SErvice 230 S. Dearborn Mail-stof Solo-CHI Chicago, IL 60604	500 Fast Cash 515 G. SE. MIAMI, OK 74354
Silver Cloud 635, Ehighway 200 upper luke, CA 95485	white hill I sland Finance, LLC 300 P.O BOX 330 Hays, MT 59527
F.O. Box 14245 LenexA, KS 66285	Harvest Moon P.O Box 1120 Boulevard, CA 91905
E-FINANCE P.O BOX 14245 LENEXA, KS 66285	united cash loans 3531 f St. NW Miami, ok 14355
QUEST Diagnostic 1355 Mittel Borlevard Wood dale, IL 60191-1024	Mercury finance P.O BOX 12914 NorFolk, VA 23541
CBHIV P.O BOX 831 Newburgh, NY 12551	
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Fill in this information to identify your case:	
Debtor 1 CEARLIC ROGERS	
First Name Middle Name Last Name Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois	
Case number	☐ Check if this is an
(If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistica	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsinformation. Fill out all of your schedules first; then complete the information on this form. If you are filing	nsible for supplying correct amended schedules after you file
your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets
Schedule A/B: Property (Official Form 106A/B)	Value of what you own
1a. Copy line 55, Total real estate, from Schedule A/B	s
1b. Copy line 62, Total personal property, from Schedule A/B	s
4a Comulino 62. Total of all proporty on Cabadyla 4/0	<i>Q</i>
1c. Copy line 63, Total of all property on Schedule A/B	s_9,000
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Good
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	D
 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F 	ss
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	. 160.928
	404007
Your total li	s <u>/77.928.</u>
Part 3: Summarize Your Income and Expenses	The state of the s
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	s 1463
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	<u>\$ 2483</u>
	200

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9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

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Fill in this information to identify your case and this	filing:		
Debtor 1 Ledevill First Name Middle Name	Rudoer		
Debtor 2 (Spouse, if filing) First Name Middle Name	Lasi Name		
United States Bankruptcy Court for the: Northern District of	İ		
Case number			
			Check if this is an amended filing
Off : 1 = 400 A/D			amenaca ming
Official Form 106A/B			
Schedule A/B: Property	y		12/15
In each category, separately list and describe items category where you think it fits best. Be as comple responsible for supplying correct information. If my write your name and case number (if known). Answ Part 1: Describe Each Residence, Building, 1. Do you own or have any legal or equitable interests.	te and accurate as possible. If two married people ore space is needed, attach a separate sheet to this ver every question. Land, or Other Real Estate You Own or Have	e are filing together, bo is form. On the top of a re an Interest In	th are equally
No. Go to Part 2.			
Yes. Where is the property?	What is the property? Check all that apply.	Do not doduct appured of	nime or exemptions. But
	Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
1.1. Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		, , ,
	Manufactured or mobile home	entire property?	Current value of the portion you own?
	Land	\$	\$
	Investment property Timeshare	Describe the nature of	
City State ZIP Code	Other	interest (such as fee the entireties, or a life	
	Who has an interest in the property? Check one.		
	Debtor 1 only Debtor 2 only	SAVA CONTRACTOR CONTRA	
County	Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this it property identification number:		
If you own or have more than one, list here:			
	What is the property? Check all that apply.	Do not deduct secured cla the amount of any secure	
1.2. Street address, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building	Creditors Who Have Clair	
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home Land	entire property?	portion you own?
	investment property	\$	\$
City State ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee	
,	Other	the entireties, or a life	e estate), if known.
	Who has an interest in the property? Check one. Debtor 1 only		
County	Debtor 2 only		
County	Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
	\square At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this iter property identification number:		

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	(die		(13.20.30 DES	
1.3.	Streel address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	City State ZIP Code	Investment property	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:		mmunity property
		all of your entries from Part 1, including any entried here.		\$ P
you own	that someone else drives. If you lease a vehic , vans, trucks, tractors, sport utility vehicle to	est in any vehicles, whether they are registered or sole, also report it on Schedule G: Executory Contracts on sometimes, motorcycles		5
3.1.	Make: ALSSAN Model: Maxima Year: 2007 Approximate mileage: /35008 Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? 9,000	d claims on Schedule D:
ff you	own or have more than one, describe here:			
3.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Year: Approximate mileage: Other information:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	

Doc 1 Filed 08/29/16 Entered 08/29/16 09:26:56 Page 17 of 71 Debtor 1 Case number of know Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories O No Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. But the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year:

g. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Current value of the

portion you own?

Current value of the

entire property?

Other information:

Debtor 1 and Debtor 2 only

instructions)

At least one of the debtors and another

Check if this is community property (see

Debtor	r 1 Case number (if known) Case number (if known)		100° - V 5 5° 10° 10° 10° 10° 10° 10° 10° 10° 10° 10	ANALIS NO STANIS SERVICES
Part :	35 Describe Your Personal and Household Items			
	u own or have any legal or equitable interest in any of the following items?	porti Do no	ent value of on you own t deduct secumptions.	n?
	usehold goods and furnishings			
	amples: Major appliances, furniture, finens, china, kitchenware			
	No Yes. Describe	\$	55	Ó
7. Ele	ectronics			
Еха	amples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games			
	No Yes. Describe	\$	25	0
8. Col	lectibles of value			
Exa	amples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;			
×	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		A	
	Yes. Describe	_	P	
_		\$		
9. Equ	sipment for sports and hobbies			
Exa	amples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments			
×		* 1	Ch	
	Yes. Describe	\$	8	
10. Fire				
Exa VZ	amples: Pistols, rifles, shotguns, ammunition, and related equipment			
/10000	No Yes. Describe	. [φ	
	res. Describe	\$		
11. Clo	thes			
Exa	amples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories			
		٠.	200	ל
X	Yes. Describe	\$	200	
12 Jaw	roles.			

44. Any other personal and household items you did not already list, including any health aids you did not list

Yes. Give specific information.	-House hold	60005		· · · · · .	\$ 200	
5. Add the dollar value of all of your		g any entries for pages	s you have attached		1200	

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Case number (# known)_

Part 4: Describe Your Financial Assets

Do you own or have any	legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you	have in your wallet, in your hom	e, in a safe deposit box, and on hand when you file your petition	
☐ No Ves		Cash:	s 100
17. Deposits of money <i>Examples:</i> Checking,	savings, or other financial accou	nts; certificates of deposit; shares in credit unions, brokerage houses	6,
and other's	similar institutions. If you have mu	ultiple accounts with the same institution, list each.	
Yes		Institution name:	
	17.1. Checking account:	CHUSE Liquid Card	\$ 9
	17.2. Checking account:	•	\$ Ø
	17.3. Savings account:		\$
	17,4. Savings account:		\$ `
	17.5. Certificates of deposit:		\$ Ø
	17.6. Other financial account:		s
	17.7. Other financial account:		\$
	17.8. Other financial account:		s
	17.9. Other financial account;		. \$ <u></u>
Examples: Bond funds No		erage firms, money market accounts	
☐ Yes	Institution or issuer name:		. <i>(</i>)
	and the second section of the sectio		\$ <u>\tau</u>
			\$ \$
19. Non-publicly traded	stock and interests in incorpo	rated and unincorporated businesses, including an interest in	
	, and joint venture		
an LLC, partnership, No Yes. Give specific	Name of entity:	% of ownership: 0%	s Ø
∑ No		Λ0/	\$ Ø \$ Ø

/ p.//	esses.	2 1 Filed 08/29/16 Document	Page 20 of 71	Desc Main
btor 1 Fist Name	Middle Name	Cast Name	Case number (if known)	
			and the first and a second	
Negotiable instruments i	include personal ch	other negotiable and non-ne necks, cashiers' checks, prom cannot transfer to someone b	issory notes, and money orders.	
-	a.o 2.000 you		, o.g	
No Yes. Give specific	Issuer name:			
information about them				s
				\$ <u>P</u>
				s
Retirement or pension				
ixamples: Interests in IF ☑No	RA, ERISA, Keogh,	, 401(k), 403(b), thritt savings	accounts, or other pension or profit-sharing pla	ans
Yes. List each account separately.	Type of account:	Institution name:		
	401(k) or similar pla	in:		_ \$ <u></u>
	Pension plan:			s <u>C</u>
	IRA:			_ \$
	Retirement account	:		_ \$ <u> </u>
	Keogh:			s
	Additional account.			_ \$
ecurity deposits and I	Additional account:			sQ s
Your share of all unused Examples: Agreements ompanies, or others No	Additional account: prepayments d deposits you have with landlords, prep	e made so that you may contin	nue service or use from a company ric, gas, water), telecommunications	Co
our share of all unused xamples: Agreements ompanies, or others	Additional account: prepayments I deposits you have with landlords, prep Electric: Gas:	e made so that you may continuate and rent, public utilities (elect	nue service or use from a company	CD
our share of all unused (xamples: Agreements ompanies, or others	Additional account: prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil:	e made so that you may continual rent, public utilities (elect	nue service or use from a company ric, gas, water), telecommunications	CD
our share of all unused xamples: Agreements ompanies, or others	Additional account: prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil:	e made so that you may continual rent, public utilities (elect	nue service or use from a company	CD
our share of all unused (xamples: Agreements ompanies, or others	Additional account: prepayments I deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on	e made so that you may continual rent, public utilities (elect	nue service or use from a company ric, gas, water), telecommunications	CD
our share of all unused xamples: Agreements ompanies, or others	Additional account: prepayments deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent:	e made so that you may continual rent, public utilities (elect	nue service or use from a company ric, gas, water), telecommunications	CD
our share of all unused xamples: Agreements ompanies, or others	Additional account: prepayments I deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone:	e made so that you may continual rent, public utilities (elect	nue service or use from a company ric, gas, water), telecommunications	Co
our share of all unused (xamples: Agreements ompanies, or others	Additional account: prepayments deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water:	e made so that you may continuate rent, public utilities (elect Institution name or individual:	nue service or use from a company ric, gas, water), telecommunications	CD
Tour share of all unused Examples: Agreements of all unused on panies, or others I No Yes	Additional account: prepayments deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	e made so that you may continuate rent, public utilities (elect Institution name or individual:	nue service or use from a company ric, gas, water), telecommunications	Co
Examples: Agreements of companies, or others No Yes	Additional account: prepayments deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	e made so that you may continuate rental unit:	nue service or use from a company ric, gas, water), telecommunications	Co
Cour share of all unused Examples: Agreements to companies, or others No Yes	Additional account: prepayments deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	e made so that you may continuate rental unit:	nue service or use from a company ric, gas, water), telecommunications	Co
Cour share of all unused Examples: Agreements to companies, or others No Yes Annuities (A contract for	Additional account: prepayments deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	e made so that you may continuate rental unit:	nue service or use from a company ric, gas, water), telecommunications	Co

Debtor 1	Case 16-27591	Doc 1 Filed 98/29/16 Document	Entered 08/29/16 09:26:56 Page 21 of 71 Case number (# known)	Desc Main
26 U.S.	C. §§ 530(b)(1), 529A(b), an		gram, or under a qualified state tuition progr	ram.
Ŭ Yes	Insti		ely file the records of any interests.11 U.S.C. §	521(c):
	equitable or future interes able for your benefit	ets in property (other than anything	listed in line 1), and rights or powers	
	. Give specific rmation about them			\$ Q
Example No U Yes.	., .	trade secrets, and other intellectua websites, proceeds from royalties and		s
Example No Yes.	es, franchises, and other g es: Building permits, exclusion . Give specific rmation about them		oldings, liquor licenses, professional licenses	\$
Money or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	unds owed to you Give specific information about them, including whete you already filed the returns and the tax years.		Federal: State: Local:	\$ 453.°° \$ Q
☐ No	es: Past due or lump sum ali		maintenance, divorce settlement, property sett	tlement
Yes.	Give specific information	Back Chi	Alimony: Maintenance: Support: Divorce settlement Property settlement	
			s, sick pay, vacation pay, workers' compensat	ion,
No Yes.	Give specific information			s

• Debtor 1	Case 16-27591	Doc 1 Filed 08/2	ent Page	ered 08/29/16 09:26:5 22 of 71	66 Desc Main
Deplor	Birst Name Middle Name	Last Name		Case number (# known)	
Exampl	ts in insurance policies les: Health, disability, or life	insurance; health savings acc	count (HSA); credi	t, homeowner's, or renter's insura	nce
No.					
∪ Yes	 Name the insurance comp of each policy and list its v 			Beneficiary:	Surrender or refund value:
					s ()
				The first of the f	\$
22 Any int	caroot in proposity that is di	a van fram gamana wha	han diad		
If you ar property		ue you from someone who litrust, expect proceeds from a d.		icy, or are currently entitled to rec	eive
XI No					
∟ Yes	. Give specific information				s
		ther or not you have filed a disputes, insurance claims, or		a demand for payment	
	. Describe each claim	:			···· • · · · · · · · · · · · · · · · ·
	. Dodonos odon otosmi,				\$ Ø
34. Other co to set o	ontingent and unliquidate off claims	d claims of every nature, in	cluding counterd	laims of the debtor and rights	
•	. Describe each claim	*************		e de la Secreta de la companya de l La companya de la companya de	
					\$
🛛 No	ancial assets you did not a				· · · · · · · · · · · · · · · · · · ·
					*
		entries from Part 4, includi			s 1,079
Part 5:	Describe Any Busin	ess-Related Property	y You Own or	Have an Interest In. Lis	t any real estate in Part 1.
37 Do vou	own or have any legal or a	equitable interest in any bus	siness-related or	nnerty?	
	Go to Part 6.	.quitable interest in any ba	omeoo related pr	operty:	
*	. Go to line 38.				
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
20 4	A				or exemptions.
	ts recelvable or commissi	ons you aiready earned			
No No	. Describe			the second secon	
⊶a ies.					\$ Ø
39. Office e	equipment, furnishings, an	d supplies			
Examples			ers, fax machines, ru	gs, telephones, desks, chairs, electron	ic devices
No BY					
Yes.	. Describe				s
	<u> </u>				

Case 16	j-27591 Do		led 08/29/10 Document	6 Entere Page 23		Desc Main
Debtor 1 First Name	Middle Name	Last Name	0	4	Case number (if known)	
40. Machinery, fixtures,						
Yes. Describe						s Ø
41. Inventory No Yes. Describe	· · · · · · · · · · · · · · · · · · ·					's Ø
	*					· ·
42. Interests in partners		res				
Yes. Describe	Name of entity:				% of ownersh	ip:
					%	\$ 0
			and an institute of the state o		Market and Assistant Control and Assistant Ass	\$
43. Customer lists, maili No Yes. Do your lists	s include personal			s defined in 11	U.S.C. § 101(41A))?	
Yes. Des	cribe					\$ <i>Co</i>
44. Any business-related No Yes. Give specific information		not already				\$
						\$
						\$
					e samentan samen samen samen sakaan aan aan aan aan aan aan aan aan sa men samen samen samen samen samen samen s	\$\$
	emenumente merkumenerte durinten Welte lund	almander or demonstrately between the control of the control of a state of the control of the co	TOTAL AND	Better the Arthorist of the Arthorist constitution of the antisens and		\$
	STEPPERS STEELES PROGRAMMENT AND AND ARRANGE CONTRACTOR					\$
45. Add the dollar value for Part 5. Write that	•			•	0	→ \$ Ø
	Any Farm- and Cor have an interest			ed Property \	ou Own or Have an Intere	st In.
46. Do you own or have ∴ XA No. Go to Part 7. ☐ Yes. Go to line 47		able interest	in any farm- or o	ommercial fish	ning-related property?	
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals Examples: Livestock,	poultry, farm-raised	l fish				
☐ No						
Yes			•			
				-		\$

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First Name Middle Name Last N	Name Case number (if known)
48. Crops—either growing or harvested	
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, ma	chinery, fixtures, and tools of trade
Yes	\$
50. Farm and fishing supplies, chemicals, and fee	ed
☐ No ☐ Yes	
	\$
51. Any farm- and commercial fishing-related pro No	perty you did not already list
Yes. Give specific information	
	<u>\$</u>
	n Part 6, including any entries for pages you have attached
53. Do you have other property of any kind you d Examples: Season tickets, country club membership No Yes. Give specific information	
Part 8: List the Totals of Each Part	of this Form
55. Part 1: Total real estate, line 2	→ s <u> </u>
56. Part 2: Total vehicles, line 5	§ 900
57. Part 3: Total personal and household items, fin	ne 15 \$
58. Part 4: Total financial assets, line 36	s
59. Part 5: Total business-related property, line 45	s
60. Part 6: Total farm- and fishing-related property	y, line 52 \$
61. Part 7: Total other property not listed, line 54	+ \$
62. Total personal property. Add lines 56 through 6	1 \$ Copy personal property total → +\$
63. Total of all property on Schedule A/B. Add line	55 + line 62

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Fill in this in	formation to iden	tify your case:			
Debtor 1	/wee	·~	Talor	Machine Control of the Control of th	
	Fist Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for	the: Northern District of	Illinois		
Case number (If known)	and a second and a second seco		anness ann ann ann ann an a' dh		Chec amen

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:

Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of t	the property and line on	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	Turneline	§ 55ల	\$	135 IL CS 5/12-1001(B)
Schedule A/B: Brief description:	Cup top	s250	☐ \$ Z\$ O 100% of fair market value, up to	735 11(5 5/12-1001(8)
Schedule A/B: Brief description: Line from Schedule A/B:	Cloths	\$ 2 ©0	any applicable statutory limit \$ \(\bigcirc \) \(735 IL CS 5/12-1001(B)

3.	Are you claiming a homestead exemption of more than \$160,375?
	(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment
	№ No
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	☐ No
	☐ Yes

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Debtor 1

irst Name Middle Name Last Name Case number (d known)

ŧ	T .		-11	77	74
	11	-11			
			T		97

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from	Check only one box for each exemption	
Brief House hold Good	s 200	□s 200	
description:	Ψ		735 IL CS 5/12-1001-(6
Schedule A/B: Brief description: W.SSAN Maxin	9.000	1 s 9,000	
3	4 \$	100% of fair market value, up to	735 IL CS 5/12-1001-(
Schedule A/B:		any applicable statutory limit	135 12 45 2/12 1001
Brief description:	\$	s	
Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B:			
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	D \$	
Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B:			
Brief description:	\$	\$ to 0.00% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief	\$		
description: Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief		, ,,	ALL PLANTS OF THE PARTY OF THE
description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B: ———		any applicable statutory limit	
Brief	\$	_ \$	
description: Line from	-	100% of fair market value, up to any applicable statutory limit	
Schedule A/B:		any applicable statutory mint	
Brief description:	\$	_ O \$	
Line fromSchedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief	\$	\$	
description: Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B: ———		any appricable diatatory milit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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	The s			
Fill in this information to identify your case	se:			
Deblor 1 First Name Middle	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number				
(If known)			= = =	if this is an led filing
			uniche	ica ming
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secure	ed by Pro	perty	12/15
information. If more space is needed, cop additional pages, write your name and ca	,	ually responsible t and attach it to this	for supplying corrects form. On the top o	ct f any
 Do any creditors have claims secured I No. Check this box and submit this for Yes. Fill in all of the information below 	m to the court with your other schedules. You have noth	ng else to report on	this form.	
Part 1: List All Secured Claims				
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 red: + Acceptance	Describe the property that secures the claim:	s 9,000	\$15,000	\$ 9.000
Creditor's Name			The state of the s	
Number Street	· - :	X		
	As of the date you file, the claim is: Check all that apply.			
South Field M1 4808 City State ZIP Code	Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (Including a right to offset)	-		
community debt Date debt was incurred 6-11-16	Last 4 digits of account number 7476			
2.2	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		i		
Number Street	- : - :			
	As of the date you file, the claim is: Check all that apply			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred Add the dollar value of your entries in	Last 4 digits of account number Column A on this page. Write that number here:	\$ 9,000		

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Debtor 1 First Name Middle Name	Case number (if known)					
First Name Middle Name	Last Name					
Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
	Describe the property that secures the claim:	\$	\$;	\$		
Creditor's Name						
Number Street	-!					
City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	۸.				
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) 					
Community debt Date debt was incurred	Last 4 digits of account number					
to a second make the exercise was the entering the property of the entering of		Santana Santan				
Creditor's Name	Describe the property that secures the claim:	\$	\$.		
Creditor's iname	<u> </u>					
Number Street	· . 					
	As of the date you file, the claim is: Check all that apply					
	Contingent Unliquidated					
City State ZIP Code	Disputed					
Who owes the debt? Check one.	Nature of lien, Check all that apply.					
Debtor 1 only	An agreement you made (such as mortgage or secured					
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)					
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit					
Check if this claim relates to a community debt	Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
The state of the s		ang again an				
Creditor's Name	Describe the property that secures the claim:	*	\$9	·		
Number Street						
	As of the date you file, the claim is: Check all that apply					
City State ZIP Code	Contingent Unliquidated Disputed	•				
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	An agreement you made (such as mortgage or secured					
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	Judgment lien from a lawsuit					
Check if this claim relates to a community debt	Other (including a right to offset)	***************************************				
Date debt was incurred	Last 4 digits of account number					
Add the dollar value of your entries	s in Column A on this page. Write that number here:					
	add the dollar value totals from all pages.	\$				

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Debtor :		* 1 h			Case number (ii known)
Par	Microscopic de la constanta	irst Name Middle Name List Others to Be No	Last Name	That You Alreads	· Listad
Use ager you	this page ncy is try have mo	e only if you have others ing to collect from you fo	to be notified about or a debt you owe to any of the debts that	your bankruptcy for someone else, list th you listed in Part 1, I	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
i	Name				Last 4 digits of account number
-	NJ. 7226	Charles	واستداد بالمساونة في المارية عن المارية والمارية والمارية والمارية والمارية والمارية والمارية والمارية والمارية		***
f	Number	Street			
-			درست ساو سرو میداند. و وی درستان به این این استان به این این استان وی ساوند و ساوند ساوند.		
Õ	City		State	ZIP Code	-
*************	** *				On which line in Part 1 did you enter the creditor?
, P	Name	· .			Last 4 digits of account number
 N	Number	Street			
,	40111001	Orocci			
-			THE POINT A STORE INCOMENTATION OF SETTINGS OF A PARTIES OF COLORINA THE PARTI		
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
1	Vame		and the control of the control of the best of the state of the control of the con		Last 4 digits of account number
1	Number	Street			-
_					-
					_
	City	e de la companya de	State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
'n	Vame				Last 4 digits of account number
ī	Vumber	Street	ankan da and hadi kadi and kadi kadi ankan da ankan and kadi kadi kadi ankan da da ankan da da da da da da da a	that that for each suit of foot out of the contract attacks of the contract of the contract of the contract of	-
ō	Dity		State	ZIP Code	_
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
_					
N	Number	Street			
***					-
ō	Dity		State	ZIP Code	
		•			On which line in Part 1 did you enter the creditor?
,	Name				Last 4 digits of account number
ï.	Number	Street			-
				I ANA STANIES AND STORY WITH A TOPOGRAPH A TRANSPORT AND STANIES A	
_					
C	City		State	ZIP Code	

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Fill in this information to identify your case:	Document 1 age 30 of 7	1
(adeas	20-0	
Debtor 1 First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name	Lasi Name	
United States Bankruptcy Court for the: Northern District	of Illinois	
Case number (If known)		☐ Check if this is an amended filing
Official Form 106E/F		
Schedule E/F: Creditors V	Vho Have Unsecured	Claims 12/15
creditors with partially secured claims that are list	unexpired leases that could result in a clause G: Executory Contracts and Unexpired in Schedule D: Creditors Who Have C the entries in the boxes on the left. Attacumber (if known).	aim. Also list executory contracts on Schedule ed Leases (Official Form 106G). Do not include any

Do any creditors have priority unsecured claim No. Go to Part 2.	s against you?	
nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	a claim has both priority and nonpriority am claims in alphabetical order according to the Part 1. If more than one creditor holds a pa	ounts, list that claim here and show both priority and creditor's name. If you have more than two priority rticular claim, list the other creditors in Part 3.
(For an explanation of each type of claim, see the	nstructions for this form in the instruction bo	·
¬ \ 1, .		Total claim Priority Nonpriority amount amount
21 Child Support Enforcem	TLast 4 digits of account number <u>6</u> 3	64 , 8000 , 710 ,8000
Priority Creditor's Name		_
509 S. 6th St.	When was the debt incurred? 20	<u></u>
	As of the date you file, the claim is: Chec	k all that apply
Springfield IL 6270	Contingent	сан изосарру.
City I J State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	 Domestic support obligations 	
At least one of the debtors and another	Taxes and certain other debts you owe the	government
Check if this claim is for a community debt	Claims for death or personal injury while yo	ou were
Is the claim subject to offset?	intoxicated	
☐ No	Other, Specify	THE PROPERTY OF A PROPERTY OF
Yes	entropy of the second of the s	
2.2	Last 4 digits of account number	ssss
Priority Creditor's Name	1111	
WANTED BACK TO THE PARTY OF THE	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Checl	s all that apply.
	☐ Contingent	,
City State ZIP Code	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the	
Check if this claim is for a community debt	Claims for death or personal injury while you intoxicated	ou were
Is the claim subject to offset?	Other. Specify	
☐ No ☐ Yes	- VNO. Openly	

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Case number (if known)

r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	- Disputed			
Deblor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Deblor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?				
☐ No ☐ Yes				
J TES	was a sangara and a sangar	And a state of the second		
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	when was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?				
□ No				
Yes	e e e e e e e e e e e e e e e e e e e		was a	
	Look & digito of page	\$	\$	\$
Priority Creditor's Name	Last 4 digits of account number	Ψ	*	4
Number Street	When was the debt incurred?			
कार्या अस्त्रवर	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	a bispated			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	·	÷	
s the claim subject to offset?				
□ No				
Yes				

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Case number (if known)

		1000	
	-		-33
سا	216	Z-	- 192

List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsecured claims against No. You have nothing to report in this part. Submit this form to Yes		
i	List all of your nonpriority unsecured claims in the alphabetic nonpriority unsecured claim, list the creditor separately for each c included in Part 1. If more than one creditor holds a particular clai claims fill out the Continuation Page of Part 2.	laim. For each claim listed, identify what type of claim it is. Do no	ot list claims already
			Total claim
4,1		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street	when was the debt incurred?	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Deblor 1 only	☐ Disputed	
	Debtor 2 only	•	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
		 Obligations arising out of a separation agreement or divorce 	
	Check if this claim is for a community debt Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt	_
	No		
	Yes	Other Specify	•
	LL TUS		
4.2		Last 4 digits of account number	s.
لــــا	Nonpriority Creditor's Name	When was the debt incurred?	Ψ
	Nonpriority Creditor's Name	when was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	quantur que	
		Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	T (NONDRIGHTY 1.1.	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debt	s
	□ No	Other. Specify	
	Yes		
	of the magnetic programment of the control of the c		
4.3	RAPACATA AND AND AND AND AND AND AND AND AND AN	Last 4 digits of account number	¢.
	Nonpriority Creditor's Name	When was the debt incurred?	3
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	•	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Toward MONDPIONITY	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	\$
	No First	Other Specify	
	☐ Yes	 ment and ment of body of the control of the first format an account of the other first of the device of the control of the contr	

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Desc Main

Part 2:

List All of Your NONPRIORITY Unsecured Claims

	oo any creditors have nonpriority unsecured claims against you. No. You have nothing to report in this part. Submit this form to the Yes		
n ir	ist all of your nonpriority unsecured claims in the alphabetical of compriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, litalims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	list claims already
		A 1978 A 1971 - TANKE TO THE TRANSPORT OF THE PARTY OF THE PARTY AND A 1979 A 1979 A 1979 A 1979 A 1979 A 1979	Total claim
4.1	Capital One	Last 4 digits of account number	s 1,236 ³¹
	P.O. Box 70886	When was the debt incurred?	*
	Charlolotte, NC 28272 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	NAMES in accounted the Identity Observations	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	■ Debtor 1 only Debtor 2 only	Disputed	:
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	* prince According
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	***************************************
	•	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debtsOther. Specify	
	☐ Yes	Onler. Opening	1
4.2	Kay Jewleks	Last 4 digits of account number 2 7 1 9	s /,037.20
	Nonpriority Creditor's Name Roy 1799	When was the debt incurred? $62/12$	A A A A A A A A A A A A A A A A A A A
	Number A Co. 1	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Table 2 commend the delete Orbert and	Unliquidated	
	Who incurred the debt? Check one.	Disputed *	1
	Debtor 1 only Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	!
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	And Physics of the Control of the Co
:	•	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	She is closely a
	Is the claim subject to offset?	Other. Specify	Control of Control
	□ Yes		e and the second
4.3	arinaran ang managang arang arang managanan ang managang managanan ang managang managang managang managang man NAD H. F.	- North and the state of the st	il e enel trespentent met etementent etemen tine trekkinen ur en partieteren.
	Nonpriority Creditar's Name	Last 4 digits of account number 7777	s 7.762 5 3
5 5 5	P.O. Box 259407	When was the debt incurred? $02//2$	-
	Number Plano, TX 75025		A guzhana
	City Plano, 1X 13025	As of the date you file, the claim is: Check all that apply.	PAR - 127 - 13974
:	Who incurred the debt? Check one.	Contingent	10 m
	Debtor 1 only	Unliquidated	5
	Debtor 2 only	☐ Disputed	The state of the s
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	verupilira
	At least one of the debtors and another	☐ Student loans	***
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	of the section is
İ	Is the claim subject to offset?	that you did not report as priority claims	Addition (A):
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
			IAFI I

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Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, OM CUST CORPORATION Nonpriority Creditor's Name 1701 JFK Bovlevard Number Street Philadelphia, PA 19103	followed by 4.5, and so forth. Last 4 digits of account number 9058 When was the debt incurred? $10/13$ As of the date you file, the claim is: Check all that apply.	Total claim
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify 	
Pank of America Nonpriority Creditor's Name TOO RIVEY OAKS DR. Number Street Calumet City, It 60409 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number 3 2 1 9 When was the debt incurred? 08/11 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	s 804 9
Nonpriority Creditor's Name GIHO N. Lincoln Ave. Number Street Chicked IL 60659 City State ZIP Code Who incurred the debt? Check one. Poebtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 7 7 8 3 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	s 1,097

	~		
Firs	t Name	Middle	

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them beginning with 4.4,	followed by 4.5, and so forth.	Total claim
4.7	Cash Call	Last 4 digits of account number 4968	s 4,430 11
	Nonpriority Creditor's Name	When was the debt incurred? 02/12	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Gity State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	☐ No ☐ Yes		
4.8	Seico indemnity Company Nonpriority Creditor's Name	Last 4 digits of account number 7 7 8 3	s 7812
	P. D. Box 55126	When was the debt incurred? 81/12	
-	Boston, MA 02205	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only	a Dispoted	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other Specify	
	Yes		1177.60
1.9	Wow Chicago	Last 4 digits of account number 9 506	\$ 146 91
	To CREdit Management	When was the debt incurred?	
Pic	Number Street 8 8	As of the date you file, the claim is: Check all that apply.	
	Carrollton, TX 75011-8288	Contingent Unliquidated	
	Who incurred the debt? Check one.	Onliquidated Disputed	
	Debtor 1 only	•	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify	
	☐ Yes		

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First Name Middle Name	Last	Name		

Į.	rt 2:	List All	of Your NC	NPRIORIT	'Y Unsecu	red Clair	ms
3.	Do any	creditors	have nonpi	iority unsec	cured claim	s against	you?

	No. You have nothing to report in this part. Submit this form to the X Yes	court with your other schedules.	
	List all of your nonpriority unsecured claims in the alphabetical on nonpriority unsecured claim, fist the creditor separately for each claim, included in Part 1. If more than one creditor holds a particular claim, list claims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	list claims already
			Total claim
4:10	Internal Revenue Service Nonpriority Creditor's Name	Last 4 digits of account number 7 7 8 3	s 38.000
	230 S. Dearborn	When was the debt incurred? 2001- 2013	\$ 0,000
	Number Street CACO City State State Street CO604 State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No Pes	Other. Specify	
4.11	City OF ChicaGO : Ticket !	Last 4 digits of account number 7 7 83	s \$06/00
1	Nonpriority Creditor's Name Violetion	When was the debt incurred?	*
	121 N. (usalle		
	Chicago IL 60606	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	∑ No	Other. Specify	
	Yes		
212		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	;
	Debtor 2 only	☐ Disputed	
	Dobtor 1 and Dobtor 2 poly	Type of NONDRIODITY	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loansObligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	[] No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify	1
			notil



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Debtor 1 '

Part 3:

	example, if a collection agency is trying to collect from you f 2, then list the collection agency here. Similarly, if you have m	ur bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or fore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
*	United Recovery Systems	On which entry in Part 1 or Part 2 did you list the original creditor?
	5800 N. Course Drive	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim
-	Hovston Texas 77072 Gily State ZIP Code	Last 4 digits of account number 1 9 4 4
1	Synergetic Communications	On which entry in Part 1 or Part 2 did you list the original creditor?
,	5450 N.W. Central #1000	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Houston Texas 17092 City State ZIP Code	Last 4 digits of account number 28 44
X	Symmetric Communications	On which entry in Part 1 or Part 2 did you list the original creditor?
	2700 East selficeway	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Post Falls, ID 83854 City State ZIP Code	Last 4 digits of account number
ķ	Delbert Service Corporation	On which entry in Part 1 or Part 2 did you list the original creditor?
	7125 Pollock DR. Number Street ATT: Western Sky Finacial"	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	CasyeGas, NV 89119 ZIP Code	Last 4 digits of account number
×	Silver Cloud/National Credit	On which entry in Part 1 or Part 2 did you list the original creditor?
9	Box 312125 Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
-	Atlanta GA 31131	Last 4 digits of account number 6 7 4 5
K	Malcolm Gerald & Ass.	On which entry in Part 1 or Part 2 did you list the original creditor?
	332 S. Michigan AUR Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Chicago JL 60604 State ZIP Code	Last 4 digits of account number 7809
X	Enhanced Recovery company	On which entry in Part 1 or Part 2 did you list the original creditor?
	Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Daks PA 19456 Zip Code	Last 4 digits of account number $\frac{2719}{}$

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Debtor 1

2	example, if a collection agency is trying to collect from you f !, then list the collection agency here. Similarly, if you have m	ur bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.					
×	Credit Control, UC	On which entry in Part 1 or Part 2 did you list the original creditor?					
	5757 Phantom Dr Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim					
	Hazelwood MO 63042 State ZIP Code	Last 4 digits of account number 2 7 1 9					
χĻ	Penn (Redit	On which entry in Part 1 or Part 2 did you list the original creditor?					
,	916 5 14th st	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
•	Number Street 988	Part 2: Creditors with Nonpriority Unsecured Claims					
	Harrisburg PA 17108 City State ZIP Code	Last 4 digits of account number					
Se.	Stellar Recovery, INC	On which entry in Part 1 or Part 2 did you list the original creditor?					
	1327 Highway 2 W	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
	Number Street Suite 100	Part 2: Creditors with Nonpriority Unsecured Claims					
	City / MT 59901	Last 4 digits of account number 9 0 5 8					
X	First National Collection	On which entry in Part 1 or Part 2 did you list the original creditor?					
	Number Street Waltham Way	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Sparks, NV 89434	Last 4 digits of account number 7 0 20					
۲,	Premeir Bank Card	On which entry in Part 1 or Part 2 did you list the original creditor?					
	7575 Corporate way	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured					
	Bueva of collections EDEN Praire MIN 55344	Claims Last 4 digits of account number 7 0 2 0					
.k	CRY State Zir Code	On which entry in Part 1 or Part 2 did you list the original creditor?					
**	Name	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims					
	Number Street	Part 2: Creditors with Nonpriority Unsecured					
	Williamsville, NY 14221 City State ZIP Code	Claims Last 4 digits of account number					
×	Chent Service, INC	On which entry in Part 1 or Part 2 did you list the original creditor?					
	3451 Harry S. Truman BIVd	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims					
	ST Charles Mo 6330	Last 4 digits of account number 3 2 19					

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Debtor 1

Part 3:

	example, if a collection agency is trying to collect from you for the pollection agency here. Similarly, if you have m	or bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.				
K	North star Location Service	On which entry in Part 1 or Part 2 did you list the original creditor?				
	4285 Genesee ST	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claim				
	ATT: Financial Service Cheek towasa NY 14225 City State ZIP Code	Last 4 digits of account number 32 19				
¥.	First Source Advantage	On which entry in Part 1 or Part 2 did you list the original creditor?				
	PO BOX 628	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims				
	Buffalo NY 14240 City State ZIP Code	Last 4 digits of account number 3 2 19				
*	First Source Advantage UC	On which entry in Part 1 or Part 2 did you list the original creditor?				
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
	Number Street \(\text{\chi}\)	Part 2: Creditors with Nonpriority Unsecured Claims				
	Amherst NY 14228	Last 4 digits of account number 3 2 1 9				
*	Linebarger Goggan Blaint Sumpson	ጐOn which entry in Part 1 or Part 2 did you list the original creditor?				
	P.O. Box 06140	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
	Number Street	Claims Part 2: Creditors with Nonpriority Unsecured				
(N.CAGO IL 60606 Slate ZIP Code	Last 4 digits of account number 2784				
X	E-Finance	On which entry in Part 1 or Part 2 did you list the original creditor?				
	14245 P.O. BOX	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims				
	Lenexa Kansas 66285	Last 4 digits of account number				
×	500-Fast Cash	On which entry in Part 1 or Part 2 did you list the original creditor?				
	515 G. SE	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims				
	Miami OK 74354 State ZIP Code	Last 4 digits of account number				
ď	Silver Cloud	On which entry in Part 1 or Part 2 did you list the original creditor?				
	635 E. Hichway 20 C	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured				
	1100 p	Claims				
	VOPERIAKE CH 93485 City State ZiP Code	Last 4 digits of account number				

Document

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Debtor 1

Part 3:

e 2	xample, if a collection agency is trying to collect from you then list the collection agency here. Similarly, if you have it	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or nore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
*	IPL/Integrety Loan	On which entry in Part 1 or Part 2 did you list the original creditor?
	P.D Box 14745	Line of _(Check one): Part 1: Creditors with Priority Unsecured Claims
•	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Lenexa KS 6,285	Last 4 digits of account number
X	White Rill	On which entry in Part 1 or Part 2 did you list the original creditor?
10	Island Finance LLC 300	Line of (Check one):
	Street P. D Box 330	Part 2: Creditors with Nonpriority Unsecured Claims
٠,	thays MT 59527	Last 4 digits of account number
*	United Rocovery Service	On which entry in Part 1 or Part 2 did you list the original creditor?
	18525 Torrance Ave	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	City State 21P Code	Last 4 digits of account number 6 946
-×	ADVOCATE Medical Group	On which entry in Part 1 or Part 2 did you list the original creditor?
	21014 Network Place	Line of (Check one): Part 1; Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	ChicAGO IL 60673	Last 4 digits of account number 6 9 4 6
¥	Malcolm S. Gerald	On which entry in Part 1 or Part 2 did you list the original creditor?
	332 S. Michigan Ave	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
•	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
i	Chy (A60) IL 60604 State ZIP Code	Last 4 digits of account number 6 9 4 6
*	MCS Collections, inc	On which entry in Part 1 or Part 2 did you list the original creditor?
	725 S. Wells st	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Suite 501	Part 2: Creditors with Nonpriority Unsecured Claims
	City State 2/P Code	Last 4 digits of account number 3948
W.	Medical Recovery Specialist	On which entry in Part 1 or Part 2 did you list the original creditor?
	2250 E Devon AVE	Line of (Check one): Parl 1: Creditors with Priority Unsecured Claims
	Number Street S+C 352	Part 2: Creditors with Nonpriority Unsecured Claims
	Desolains IL 60018	Last 4 digits of account number
	City State ZIP Code	

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Debtor 1

Document

Part 3:

example, if a collection agency is trying to collect from you for 2, then list the collection agency here. Similarly, if you have m	ur bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
* INGALLS Memorial	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street Sq95 Dept 0028	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Peorta Il 6/60/	Last 4 digits of account number 7 1 0 9
* INGALLS Memorial	On which entry in Part 1 or Part 2 did you list the original creditor?
P. O. Box 5435 Dep 0028	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Caro Stream IL 60197 State 21P Code	Last 4 digits of account number 7 1 0 9
* Credit Collection Services	On which entry in Part 1 or Part 2 did you list the original creditor?
Two WELLS Avenue, Dept 587 Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Newton, MA 02459	Last 4 digits of account number
X Quest DIAGNOSTICS	On which entry in Part 1 or Part 2 did you list the original creditor?
P. O. Box 64804	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Baltimore MD 21264 City State ZIP Code	Last 4 digits of account number 1 6 0
→ ARM	On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX 129 Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Thorotare NJ 08086	Last 4 digits of account number $8 3 2$
* ST. James Diabetes	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Chao JL 60678	Last 4 digits of account number 1817
X NCO Financial Systems	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street C LOS W EDISON RD	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Mishawaka IN 46545	Claims Last 4 digits of account number 2 0 2 9

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	List Others to be Notified About a best that I	or Anouty Mister
	example, if a collection agency is trying to collect from you f 2, then list the collection agency here. Similarly, if you have m	ur bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or lore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
X	Bureau of Collection Recover	On which entry in Part 1 or Part 2 did you list the original creditor?
	7575 Corporate Way	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	EDEN Prairie MN 55344 City State ZIP Code	Last 4 digits of account number 7 0 20
¥	Burea of Collection Recovery	On which entry in Part 1 or Part 2 did you list the original creditor?
	Number Street Box 9001	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ÿ	Minnetonka NN 55345 City State ZIP Code	Last 4 digits of account number 7 0 70
*	ILLINOIS Collection Service	On which entry in Part 1 or Part 2 did you list the original creditor?
	P. O. Box 1010 Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Tinly Park 60477	Last 4 digits of account number
¥	Alnold Scott harris Pic.	On which entry in Part 1 or Part 2 did you list the original creditor?
	222 Merchandise Mort Plz.	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Suite 1932 Chao IL 60654	Claims CNO# 09M1-654943 Notice ACC# 5051777810 Last 4 digits of account number
. دی	City State ZIP Code Secretary of the Code	
~χ	Mercury tinance	On which entry in Part 1 or Part 2 did you list the original creditor?
	P. O. 130× 12914 Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Norfolk VA 23541	Last 4 digits of account number 4323
*	IURNER Acceptance	On which entry in Part 1 or Part 2 did you list the original creditor?
	5900 Howard ST	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
*	SKOKIE ± L 60077 City State ZIP Code	Last 4 digits of account number 2 0 60
	Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	City State ZIP Code	Last 4 digits of account number

e:	xample, if a collection agency is trying to collect from you to	r bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
		On which entry in Part 1 or Part 2 did you list the original creditor?
	P.O Box 5358	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
	EI BIN, TL 60/2/ City State ZIP Code	Last 4 digits of account number 2060
*	Paul D. Laweut / Turner Acceptance	On which entry in Part 1 or Part 2 did you list the original creditor?
	P-0 Box 57/8	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street VDB 32060	Part 2: Creditors with Nonpriority Unsecured Claims
	EL Gin IL 60/21 City State ZIP Code	Last 4 digits of account number 2060
¥	Turner Acceptance	On which entry in Part 1 or Part 2 did you list the original creditor?
Ì	4410 N. Ravenswood Ave	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Chicago IL 60640 Giv State ZIP Code	Last 4 digits of account number
#	Freedman Anselmo Lindberge	On which entry in Part 1 or Part 2 did you list the original creditor?
	1771 W. DiEhl Road	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Napperville IL 60563 City State ZIP Code	Last 4 digits of account number 0 7 9 7
7	Blitt And Gaines P.C.	On which entry in Part 1 or Part 2 did you list the original creditor?
	Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
	Wheeling IL 60090 City State ZIP Code	Last 4 digits of account number 0797
¥	Nelson watson + Ass.	On which entry in Part 1 or Part 2 did you list the original creditor?
	8.0 Merrimack St.	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Number Street	Claims
1	Haverhill MA 01830 State ZIP Code	Last 4 digits of account number 0 7 9 7
¥	Capital one Bank P.O. Box 30281	On which entry in Part 1 or Part 2 did you list the original creditor?
	P.O. Box 30281	Line of (Chock one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
	Salt Lake City, VT 84130 City VT 84130	Last 4 digits of account number

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Debtor 1

Case number (# known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	s710
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	36006
	6c. Claims for death or personal injury while you were intoxicated	6c.	ş Ø
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ 8 000
	6e. Total. Add lines 6a through 6d.	6e.	s_4.4710
			Total claim
Total claims	6f. Student loans	6f.	\$ 4
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	<i>Ø</i>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	s
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ , 160, 928 07
	6j. Total . Add lines 6f through 6i.	6j.	s 160, 928,°2

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Fill	in this in	formation to	o identify	your ca	ase:											
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Debtor 1

Middle Name Last Name Case number (if known)

Additional Page if You Have More Contracts or Leases

	on or	company with	h whom you	have the contract or lease	What the c	ontract or le	ease is for	
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City			State	ZIP Code				

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Fill in	this in	formation to I	dentify your	case:					
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Debtor		First Name	M	ddle Name	Last Name	7			
Debtor (Spouse		First Name	M	iddle Name	Last Name				
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2. W	izona, (California, Idah	io, Louisiana,	Nevada, New	Mexico, Puerto R	ico, Texas, Wa	shington, and	d Wisconsin.)	
		to line 3.							
		•	se, former spo	use, or legal ed	quivalent live with	you at the time	⊋ ?		
	O N				u - 150		Fill in the	name and current address of that per	eon.
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	ī	Sity	4	State		ZIP Code	_		
					duda vaur anave		or if your so	ouse is filing with you. List the per	SOB
st Sc	nown ir chedule	n line 2 again e <i>D</i> (Official F	as a codebto orm 106D), S	r only if that p	erson is a guara Official Form 106	antor or cosign	ner. Make su	re you have listed the creditor on ial Form 106G). Use <i>Schedule D</i> ,	
(Column	1: Your code	btor				Col	umn 2: The creditor to whom you o	we the debt
r							Ch	eck all schedules that apply:	
3.1								Schedule D, line	
	Name	- Alay Party Party						Schedule E/F, line	
	Number	Street						Schedule G, line	
	City			State		ZIP Code			
3.2	City								
<u> </u>	Name			description of the second of t	annes de la companya de la companya de la companya de la companya de la companya de la companya de la companya			Schedule D, line	
		.,			* 11 1			Schedule E/F, line	
	Number	Street					_	Schedule G, line	
[]	City			State		ZIP Code	***************************************		
3.3	***************************************	111000000000000000000000000000000000000		···			Q	Schedule D, line	
	Name							Schedule E/F, line	
	Number	Street						Schedule G, line	
	City			State		ZIP Code			

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Debtor 1

Case number (# known)_

	1111		-	-	-
- 1					310
- 4					
- 1	10.5		96		
		M			20

Additional Page to List More Codebtors

	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
3]					Check all schedules that apply:
3	N			And have been designed as the second of the	Schedule D, line
	Name				Schedule E/F, line
	Number	Street			☐ Schedule G, line
1	City		State	ZIP Code	
3					☐ Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street	and the second s		Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	and tr
3			,,		Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3	Name				Schedule D, line
	ivanie				Schedule E/F, line
	Number	Street			☐ Schedule G, line
		de 197 de 1998 de maior que se constituir de la constituir de 197 de 1998 de 1998 de 1998 de 1998 de 1998 de 1		215.0.2.	of the state of th
	City		State	ZIP Code	
3	Name	che additional analysis and the second secon			Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
			Chat	ZIP Code	nodes:
3	City		State	zir coue	
	Name	And Video V	Market of the American America		Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
			Clare	710 Cada	
	City		State	ZIP Code	•

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Fill in this information to identify	Vour case:			
	Canadia			
Debtor 1 First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:	Northern District of Illinois	;		
			Check if t	his is:
(If known)			<u> </u>	nended filing
			☐ A sup	plement showing postpetition chapter 13 e as of the following date:
Official Form 106I	-		MM / E	DD / YYYY
Schedule I: You	ır Income			12/15
supplying correct information. If ye	ou are married and not f use is not filing with you top of any additional pa	iling jointly, and your spo , do not include informati	ouse is living with your spo	or 2), both are equally responsible for you, include information about your spouse. suse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.			Λ .	_
Occupation may include student or homemaker, if it applies.	Occupation	1 raffic M	anageo	
	Employer's name	tolar The	induare	
	Employer's address	1813 W. V	Montrose	Number Street
				P No Principal for an interference of the Artificial Particles of the Particles of the Artificial Section (Artificial Section (Artifica) Artificial Section (Artificial
		Chicaco I	L 606 3 ZIP Code	City State ZIP Code
	How long employed the	ere? 7mHs		***************************************
Part 2: Give Details About	Monthly Income			
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse habelow. If you need more space, a	ave more than one employ	ver, combine the information		rite \$0 in the space. Include your non-filing or that person on the lines
			For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, salideductions). If not paid monthly,			s_2400 _m	mly \$
3. Estimate and list monthly over	time pay.	3	+\$	+ \$
4. Calculate gross income, Add li	ne 2 + line 3.	4.	s 2400	\$

Document Page	50	of 71		
Debtor 1 First Name Middle Name Last Name	***************************************	Case number of known	n)	- 1 (4/4/-)
		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4.	s <u>2400</u>	\$	
5. List all payroll deductions:		~		
5a. Tax, Medicare, and Social Security deductions 5	5a.	\$ 227°8	\$	
5b. Mandatory contributions for retirement plans 5	5b.	\$ Ø	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$	
5e. Insurance 5	5e.	\$ 9	\$ <u> </u>	
5f. Domestic support obligations 5	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify: Child Support 5	5h.	+\$ 710	+ \$	
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	s 937	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 1,463	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_ 	\$	
8b. Interest and dividends	8b.	§ Ø	\$	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	t			
Include alimony, spousal support, child support, maintenance, divorce	8c.	\$_ \tau_	\$	
8d. Unemployment compensation 8	8d.	\$ 9	\$	
8e. Social Security	8e.	\$_ Q	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$_ &	\$	
	8g.	ş Ø	\$	
8h. Other monthly income. Specify:8	8h.	+\$	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ Ø	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$ 1,463 +	- \$	\$
11. State all other regular contributions to the expenses that you list in Schedul Include contributions from an unmarried partner, members of your household, you friends or relatives.	ur de	ependents, your room		
Do not include any amounts already included in lines 2-10 or amounts that are no Specify:			es listed in <i>Schedule J.</i> 11. +	\$
12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain States				\$ 1,463 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this for	rm?			
Yes. Explain:				

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Fill in this information to identify	your case:	gencialises (Section)		
Debtor 1 edeki	Middle Name Last Name	Check if this	is:	
Debtor 2 (Spouse, if filing) First Name	Middle Name Lasl Name	An amen	ded filing	
United States Bankruptcy Court for the:			ment showing post	
			s as of the following	cate:
Case number (If known)		MM / DD /	YYYY	
Official Form 106J				
Schedule J: You	ur Expenses			12/15
Be as complete and accurate as poinformation. If more space is neede (if known). Answer every question.	ssible. If two married people are filied, attach another sheet to this form	ng together, both are equally res On the top of any additional pa	sponsible for supplyinges, write your name	ing correct e and case number
Part 1: Describe Your Hou	sehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a s	eparate household?			
□ No□ Yes. Debtor 2 must file	e Official Form 106J-2, <i>Expenses for</i> S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents'		5 00	9	☐ No ※ Yes
names.				☐ No
				☐ Yes
		444444		☐ No ☐ Yes
				☐ No
				Yes
				☐ No
				☐ Yes
Do your expenses include expenses of people other than yourself and your dependents?	S-No Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses			
	bankruptcy filing date unless you a kruptcy is filed. If this is a supplem			
	n-cash government assistance if you	a know the value of		
such assistance and have included	it on Schedule I: Your Income (Offi	cial Form 106I.)	Your expe	nses
 The rental or home ownership eany rent for the ground or lot. 	expenses for your residence. Include	first mortgage payments and	4. \$1	80
If not included in line 4:				•A
4a. Real estate taxes			4a. \$ C	
4b. Property, homeowner's, or n	enter's insurance		4b. \$ Q	_
4c. Home maintenance, repair,	and upkeep expenses		4c. \$	_ · · · · · · · · · · · · · · · · · · ·
4d Homeowner's association of	r condominium duas		4d \$ %	/

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Debtor 1

(red)een	T	Rodge	
First Name	Middle Name	Last Name	\boldsymbol{v}	

Case number (if known)___

			Your	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	and a security of the second section of the section of
6.	Utilities:			.10
	6a. Electricity, heat, natural gas	6a.	\$	40
	6b. Water, sewer, garbage collection	6b.	\$	<i>\psi_</i>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	170
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	256
8.	Childcare and children's education costs	8.	\$	75
9.	Clothing, laundry, and dry cleaning	9.	\$	50
10.	Personal care products and services	10.	\$	175
11.	Medical and dental expenses	11.	\$	50
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	150
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50
14.	Charitable contributions and religious donations	14.	\$	<u>Ø</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	<u> </u>
	15b. Health insurance	15b.	\$	<u> </u>
	15c. Vehicle insurance	15c.	\$	145
	15d. Other insurance. Specify:	15d.	\$	25
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0
17.	Installment or lease payments:			~~~
	17a. Car payments for Vehicle 1	17a.	\$	323
	17b. Car payments for Vehicle 2	17b.	\$	· m - øc
	17c. Other. Specify:	17c.	\$	180-
	17d. Other. Specify: Postage (Banking)	1 7 d.	\$	w
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> , <i>Your Income</i> (Official Form 106I).	18.	\$	Ø
19.	Other payments you make to support others who do not live with you. Specify:	19.	\$	Ø
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom-		Œ.	0
	20a. Mortgages on other property	20a.	Ψ	0
	20b. Real estate taxes	206.	Φ	<u> </u>
	20c. Property, homeowner's, or renter's insurance	20c.	Φ	Ø
	20d. Maintenance, repair, and upkeep expenses	20d.	Φ	ő
	20e. Homeowner's association or condominium dues	20e.	Φ	

Page 53 of 71 Document Case number (# known) Debtor 1 Other. Specify: Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 23. Calculate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. Subtract your monthly expenses from your monthly income. 10 20 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No. ☐ Yes. Explain here:

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Fill in this information to identify	your case:			
Debtor 1 Q-	- Tel	de la la la la la la la la la la la la la		
First Name	Middle Name Last Name	Check if this		
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An amen	ided filing ment showing post	petition chapter 13
United States Bankruptcy Court for the:	Northern District of Illinois	expense	s as of the following	date:
Case number (If known)		MM / DD /	YYYY	
Official Form 106J-2				
***************************************	xpenses for Sepa	rate Household	of Debtor 2	2 12/15
Debtor 2 have one or more depend only with respect to expenses for L		s on both Schedule J and this fo hedule J. Be as complete and ad	rm. Answer the que ccurate as possible.	estions on this form If more space is
□ No. Do not complete this for□ Yes	m,			
2. Do you have dependents?				
Do not list Debtor 1 but list all other dependents of Debtor 2	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
regardless of whether listed as a dependent of Debtor 1 on Schedule J.				Yes
Do not state the dependents'				U No □ Yes
names.				☐ No
		A SAME PLANTED A PROPERTY OF THE PROPERTY OF T		☐ Yes
		ALLES AND AND AND AND AND AND AND AND AND AND		☐ No
				☐ Yes ☐ No
			**************************************	Yes
3 Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☐ No ☐ Yes			
V-07/C2/C3/C3/C3	ng Monthly Expenses			
Estimate your expenses as of your expenses as of a date after the ban	bankruptcy filing date unless you a kruptcy is filed.	are using this form as a supplem	ent in a Chapter 13 c	ase to report
Include expenses paid for with non	-cash government assistance if you	u know the value of		
	I it on Schedule I: Your Income (Off	·	Your expe	nses
 The rental or home ownership e any rent for the ground or lot. 	expenses for your residence. Include	e first mortgage payments and	4. \$	
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or re	enter's insurance		4b. \$	
4c. Home maintenance, repair,	and upkeep expenses		4c. \$	AND AND AND AND AND AND AND AND AND AND
4d. Homeowner's association or	condominium dues		4d. \$	

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Debtor 1

(~	Dun	_
First Name	Middle Name	Last Name

(Cere	Land

Case number (# known)___

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	Spanner State and State an
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other, Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
0.	Personal care products and services	10.	\$
1.	Medical and dental expenses	11.	\$
2.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
4.	Charitable contributions and religious donations	14.	\$
5.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	1 7 b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> , Your <i>Income</i> (Official Form 106I).	18,	\$
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Filed 08/29/16 Case 16-27591 Doc 1 Entered 08/29/16 09:26:56 Desc Main Page 56 of 71 Document Debtor 1 Case number (# known)_ Last Name Other. Specify: ___ 22. Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2. 22. 23. Line not used on this form. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. Yes. Explain here:

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Debtor 1 First Name Middle Name Last Name Debtor 2 Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) Check if this is amended filing				
Signature Note Northern District of Illinois	ill in this information to identify your case:			
Check if this is amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparers Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		Last Name	-	
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Pelition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		Last Name	-	
Official Form 106Dec Declaration About an Individual Debtor's Schedules 1215 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Nolice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	United States Bankruptcy Court for the: Northern District of Illinois	}		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		-	_	
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person				
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person	Official Form 106Dec			
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		dividual D	ebtor's Schedules	12/15
obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	If two married people are filing together, both are equal	ly responsible for sur	plying correct information.	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Did you pay or agree to pay someone who is NOT at	n attorney to help you		
x Color Recover	Yes. Name of person			on, and
Date 0 29 1 6 Date	that they are true and correct.	*		

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Fill in this information to identify your case:			
	مى لا ح	0	
Debtor 1 First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Lasi Name		
United States Bankruptcy Court for the: Northern District of	Illinois		
Case number (ff known)	the make a submitted of a submitted of the submitted of t		Check if this is an
			amended filing
Official Form 107			
Statement of Financial Affai	rs for Indiv	iduals Filing for Bankruptcy	04/16
Be as complete and accurate as possible. If two marrinformation. If more space is needed, attach a separ.	ried people are filing ate sheet to this for	g together, both are equally responsible for supplying. On the top of any additional pages, write your na	ng correct ame and case
number (if known). Answer every question.			
Part 1: Give Details About Your Marital Sta	tus and Where Y	ou Lived Before	
What is your current marital status?			
☐ Married ☑ Not married			
va Nocthameu			
2. During the last 3 years, have you lived anywhere	other than where y	ou live now?	
No Yes. List all of the places you lived in the last 3	years. Do not include	where you live now.	
Debtor 1:	Dates Debtor 1	Debtor 2:	Dates Debtor 2
	lived there		lived there
		☐ Same as Debtor 1	Same as Debtor 1
No. of the state o	From	N. con to the C. C. C. C. C. C. C. C. C. C. C. C. C.	From
Number Street	То	Number Street	То
	_		
City State ZIP Code	<u></u>	City State ZIP Code	
		☐ Same as Debtor 1	Same as Debtor 1
	. From		From
Number Street	To	Number Street	То
	•••		
Cily State ZIP Code	_	City State ZIP Code	
3. Within the last 8 years, did you ever live with a s	nouse or legal equi	valent in a community property state or territory? (Community property
states and territories include Arizona, California, Ida	nho, Louisiana, Nevad	da, New Mexico, Puerto Rico, Texas, Washington, and	Wisconsin.)
No Yes. Make sure you fill out Schedule H: Your Co	odebtors (Official For	m 106H).	
,	,	•	
Part 2: Explain the Sources of Your Income			

Debtor 1 Case number (# known)_ 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, From January 1 of current year until ■ Wages, commissions, bonuses, tips the date you filed for bankruptcy: bonuses, tips Operating a business Operating a business Wages, commissions, For last calendar year: Wages, commissions, bonuses, tips bonuses, tips (January 1 to December 31, Operating a business Operating a business Wages, commissions, Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2013) Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. M No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31 For the calendar year before that: (January 1 to December 31, \$____

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Debtor 1

(acking Pare gul	
irst Name Middle Name Last Name	Case number (if known)

Part 3:	List Certain Payments You Made Bef	ore You File	d for Bankruptcy		
Are eith	ner Debtor 1's or Debtor 2's debts primarily				
IJ No.	Neither Debtor 1 nor Debtor 2 has primaril "incurred by an individual primarily for a personal persona	ла, тапыу, ог	riouseriola purpose.		01(8) as
	During the 90 days before you filed for bankru	uptcy, did you	pay any creditor a total o	of \$6,425* or more?	
	No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. E child support and alimony. Also, do not be considered to the child support and alimony.	JO DOLINGLIDE i	navmente for domoctic c	support obligations of	
	* Subject to adjustment on 4/01/19 and every	3 years after to	hat for cases filed on or	after the date of adjustment	
Yes.	Debtor 1 or Debtor 2 or both have primarily			·	
	During the 90 days before you filed for bankru	intere did vou e	euts.	r. 0.0.0	
		picy, dia you p	pay any creditor a total o	1 \$600 or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payment	domestic suni	DOM ANIMATIONS SUCK AS	whild ourseast and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name		\$	\$	☐ Mortgage
	ordano, ordano				Car
	Number Street				
	Should be a second of the seco				Credit card
		***************************************			Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
	Creditor's Name		\$	\$	Mortgage
					Car
	Number Street				Credit card
					auto-
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
	Creditor's Name		\$	\$	☐ Mortgage
					☐ Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other

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Debtor 1	(se	_ler		(,	2 Jan	9	Case number (if known)		
Debior 1	First Name	Middle Name	1881	lame			Case number (if known)		
Inside corp age such	ders include your porations of which nt, including one h as child suppor	relatives; an you are an for a busine t and alimor	ny general pa officer, directors ss you operatory.	irtners; rela tor, person	atives of any goin control, or	eneral partners; owner of 20% or	you owed anyone vertherships of whice more of their voting include payments for	h you are a securities;	general partner; and any managing
					Dates of payment	Total amount paid	Amount you still owe	Reason fo	r this payment
	Insider's Name	Managarian da antara ann an Sandannana				\$	\$		
	Number Street	THE SECOND THE PROPERTY OF THE			····				
				nor consider to moderate a programme.	OPPORTUNITY SERVICE SE				
	City		State ZIP C	ode					
	Insider's Name		LANCE AND THE STREET			\$	\$		
	Number Street		MORE TO THE SECOND AS TO SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND S						
	City		State ZIP C		TOTAL TOTAL				
an ii Inclu 1- 24	nsider? ude payments on	debts guara	anteed or cosi	igned by ar		yments or trans	fer any property o	n account (of a debt that benefited
					Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name
	Insider's Name	,		<u>-</u>		\$	\$		
	Number Street			and decrease who decreased and also					
	City		State ZIP C	ode	***************************************				
	,					\$	\$		
	Insider's Name			<u>-</u>		*	*		
	Number Street								
	City		State ZIP C	ode	API APISANATARIA				

Entered 08/29/16 09:26:56 Doc 1 Filed 08/29/16 Desc Main Document Page 62 of 71 Debtor 1 Case number (if known), Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. X No Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Case title Court Name On appeal ☐ Concluded Number Street Case number City ZIP Code Pending Case title Court Name On appeal ☐ Concluded Number Street Case number City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City Property was attached, seized, or levied. State ZIP Code Describe the property Date Value of the property

Creditor's Name

Number

City

Property was repossessed.Property was foreclosed.Property was garnished.

Property was attached, seized, or levied.

Explain what happened

ZIP Code

State

Debtor 1 Case number (it known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **Ø** No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street Last 4 digits of account number: XXXX-____ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? X No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the detaits for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Street ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you ___

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Debtor 1 Case number ut known Middle Name 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Mo 🌊 Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. **List Certain Payments or Transfers** Part 7: 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid Number Street ZIP Code Email or website address Person Who Made the Payment, if Not You

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Debtor 1 Case number (if known) Last Name Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street City ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. X No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **⊠**-No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street ZIP Code Person's relationship to you _ Person Who Received Transfer Number Street ZIP Code Person's relationship to you _

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Debtor 1 Case number (if known) 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) A No Yes, Fill in the details. Description and value of the property transferred Date transfer was made Name of trust List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. √Z No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution ☐ Checking XXXX-☐ Savings Number Street Money market ☐ Brokerage City State ZIP Code Other_ Checking XXXX-Name of Financial Institution Savings Money market Number Street ☐ Brokerage Other_ State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Q Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No Yes Name of Financial Institution Name Number Street Number Street City State ZIP Code City State ZiP Code

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Name of Storage Facility Name Number Street Number Street State ZIP Code	First Name Middle Name	Last Name	Case number (if known)	
Who else has or had access to it? Describe the contents Do you's have efficient of the purpose of Part 10, the following definitions apply: Number Street Number Stre	laye you stored property in a storage u	nit or place other than your home v	vithin 1 year before you filed for bankrupto	y?
Who else has or had access to it? Describe the contents have it? Name of Storage Facility Name	Mo No			-
Name of Storage Facility Name Name	Yes. Fill in the details.			
Number Street Number Street		Who else has or had access to it	Pescribe the contents	Do you s' have it?
Number Street Number Street State ZIP Code				□ No
City State ZIP Code	Name of Storage Facility	Name	· · · · · · · · · · · · · · · · · · ·	🖸 Yes
Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No I Yes. Fitl in the details. Where is the property? Describe the property Value Owner's Name Number Street	Number Street	Number Street		
Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No I Yes. Fitl in the details. Where is the property? Describe the property Value Owner's Name Number Street		City State 7/P Coda	P-07034-18-18-18-18-18-18-18-18-18-18-18-18-18-	
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Number Street Number Street Number street	City State ZIP Code	1		
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A No Street Name Number Street Number Street Number Street State ZiP Code Gity State ZiP	Identify Property You Ho	id or Control for Someone Else	•	
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Where is the property? Describe the property Value Owner's Name Number Street	or hold in trust for someone.		property you believed from, the storing	
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Number Street Number Street City State ZIP Code City Cap Code Covernmental into the air, land, soil, surface water, groundwater, or other medium, neclucing stater, or		where is the property:	Describe the property	Value
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Document

First Name Middle Name	Last Name	Case number (d known)	V = 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12
ve you notified any government	al unit of any release of hazardous material	?	
-No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notic
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZiP Code		
City State Zif	Code		
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No	and administrative proceeding under any e	environmentariaw? Include settlemen	ts and orders.
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the
Case title			case
Case line	Court Name	-	Pendin
			On app
	Number Street	"	Conclud
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Page 69 of 71 Debtor 1 Middle Name Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Dates business existed Name of accountant or bookkeeper __ To ___ City ZIP Code State 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code Sign Below Part 12: I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Signature of Debtor 1 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? X No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? **25**- No. Yes. Name of person__ Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill In this Info	ormation to I	dentify your case:		
Debtor 1	First Name	Middle Name	Rudge	
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	V
United States B	ankruptcy Cour	t for the: Northern District of	Illinois	
Case number (If known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

List Tour Cleantors who have becomed Claims			
For any creditors that you listed in Part 1 of Schedule D: Credinformation below.	ditors Who Have Claims Secured by Property (Officia	al Form 106D), fill in the	
Identify the creditor and the property that is collateral $oldsymbol{\Lambda}$	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's radit Acceptance Description of Cay Nissan Maximus property	☐ Surrender the property.	□ No	
name, (vedi)	Retain the property and redeem it.	√ Q Yes	
Description of Cay Nissan Maximum securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
Scouring George	Retain the property and [explain]: Working with Finance Company		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
securing debt.	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	. No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
securing debt.	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	☐ No	
name:	Retain the property and redeem it.	Yes	
Description of properly securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	☐ Retain the property and [explain]:		

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Case number (# known)

Debtor 1

Part 2:

First Name

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased	Yes
property:	
Lessor's name:	☐ No
Description of leased property:	☐ Yes
and the second s	
Lessor's name:	□ No
Description of leased property:	☐ Yes
	<u></u>
Lessor's name:	☐ No ☐ Yes
Description of leased property:	La res
and the second s	en de la companya de la companya de la companya de la companya de la companya de la companya de la companya de
Lessor's name:	☐ No
Description of leased property:	☐ Yes
garage and a second control of the second co	
Lessor's name:	□ No
Description of leased property:	☐ Yes
and the second s	and the second of the second o
Lessor's name:	☐ No
Description of leased	☐ Yes
property:	
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated personal property that is subject to an unexpired lease	
Signature of Debtor 1	Signature of Debtor 2
Date 08 12916 MM / 40 / VYY	Date